U.S. DEPARTMENT OF JUSTICE

FEDERAL	BUREAU	OF	PRISONS

APRESTING OFFICER WILL COMPLETE ALL REQUIRED DATA ON THIS FORM PRIOR TO COMMITTING TO MCC/MDCs.					EPSTEIN FISH Name JEFFREY Middle Name EDWARD					
Name: Last										
AKAs:						# 6 0 va 18	8			
Race (Check)		Sex (Check) E	chnic O	rigir (Hr GRY Ey BL	(8)			
B <u>W</u> WA	I	14 _ F		_Hispani	cor_	76318-054	IN Y IV! 763	8-054 EPSTEIN		
		PY OF CHARGE		ANOR		CIVIL CONTEMPT		_ MATERIAI	. WITNESS	
OTHER										
NAPPATIVE	-	USC:	8			8				
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State of Bir	'n	Country of	Birth	Citi	zenship	Current Addres	ŝ		Zip Code	
Height Ft: In:		Weight	Hair	Ξye	3	Spars / Warks / Tattops				
Injuries / Ne	edica	ition				Emergency Con Dumber)	cace: (Ham	e, Address	, Phone	
Arraigned	3±1,	cenced H	Specia Remar	l Handi ks:	ing:	f or _!!				
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Remanding Official (Name) Agency/						/District	Pho	one/24 Hou	r Number	
Print									2 18	
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Removing Official (Name) Agence Sign					Agency	/District Phone/24 Hour Number			r Number	
Print										
				FOF	BOP	USE ONLY				
Receiving Off Sign	licia	1 (Name)		Date /	Time	Peleasing Offic. Sign	ial (Name)	Date / Time	
Print					7,40	Print				
Sentry Load Data: (Must Initial) Wame Search Completed by: Clearance/Separate Checked by: Cl							HUMBPRINT			

Original-for ISM as Remanding-Removal receipt; Copy-for Control as Removal Receipt (NCIC); Copy-For Removing Official; Copy-for Control as Remanding Receipt (Inmate); Copy-INS-Alien in Custody.

(This form may be replicated via WP)

This form replaces BP-S377(58) and BP-377(58) of JUL 91



FEB 04

U.S. DEPARTMENT OF JUSTICE



FEDERAL BUREAU OF PRISONS

						Last Name	07-08-2019			
ARRESTING OFFICER WILL COMPLETE ALL REQUIRED DATA ON THIS FORM PRIOR TO COMMITTING TO MCC/MDCs.					RED	EPSTEIN First Name JEFFREY Middle Name EDWARD				
Name: Last EASTEIN First Jeffrey					rey					
AKAs:					/	H 6' 0" M 185				
Race (Check) Sex (Check) Ethnic Origin (REG# 76318-054 NYM 76316-054 EPSTEIN				
_B XW _A _I XM _FHispanic or _					c or _	REG# / 0318-U54 NYI	76316-054	EPSTEIN		
CHARGES CHECK CATEGORY OF CHARGES(S): FELONY MISDEMEANOR CIVIL CONTEMPT MATERIAL WITNESS OTHER										
NARRATIVE: Title: // NARRATIVE: Title: //	2	usc: <u>37/</u> usc: <u>/59/</u> (58x 4),66	77.40)(2)	5997	lng CONSPIRA	cy engl	015		
Date of Offens	se:_		Date	e of Ar	rest:	7-6-/7 Place o	f Arres	: <u>Bepe</u>	W. CHY, MIT	
State of Birth	n	Country of	Birth	Citi	zenship	Current Address 9 7/37/65 Zip Code 1002/				
Height Ft: In:	0	Weight-	Hair	Eye	SLUE	Scars / Marks / Ta	ttoos			
Injuries / Med		ation			300	Emergency Contact:	(Name,	Address	, Phone	
14/29		And the state of the	1	1 1	1	(b)(6); (b)(7)(C)				
		tenced <u>X</u> N	Special Remarks	Handl:	ing:Y	or <u>V</u> N				
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Remark(b)(6); (b)(7)	(C)	3 44-5-1			rency/	District RT-	Phone	24 Hou	r Number	
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OUT			OUT	/		OUT	OUT		OUT	
Remo <mark>(b)(6); (b)(7</mark> Sign)(C)				Agency/	District FBT	Phone	/ //	r Number 6); (b)(7)(C)	
Prin							77	7	5), (5)(1)(0)	
			AND STATE	FOR	BOP U	SE ONLY				
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Sentry Load Da Name Search Co	ata:	(Must Init		ARS Co		Staff Init.	P	IGHT T	HUMBPRINT	
Clearance/Sepa	arat	e Checked b	y;	Add AK Create	A's Cash Acc	count				
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CONTRACTOR				Clothi	ng Bag #					

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	FICER WILL COMPI FORM PRIOR TO (Register Number 763/80	54	P C T				
Name: Last	PSTEIN	First Jeff	rey	Middle Edwar	2	U R E			
AKAs:									
Race (Check)	Sex (Check		rigin (C	1/20/10	sn: 90-44-3348	FBI: INS: Other:			
CHARGES CHECK CATEGORY OF CHARGES(S): FELONY MISDEMEANOR CIVIL CONTEMPT MATERIAL WITNESS OTHER									
NARRATIVE OUSC: 37/ SEX TRAFFICKING CONSPIRACY NARRATIVE OUSC: 158/(4), (6)(2) SEX TRAFFICKING OF MINORS									
				7-6-19 Place					
State of Wir	9 ETISTE	zip. Code / 1002/							
Height Ft: 6 In:	00 1995	GRY Eye	BLUE	Scars / Marks /	,	>			
Injuries / Medication Emergency Contact: (Name, Address, Phone (b)(6); (b)(7)(C)									
Arraigned Y N	Senten N	Special Handl Remarks:	ing:	or XN	,				
IN		IN		IN	IN	IN			
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OUT		OUT		OUT OUT		TUO			
Removing Off Sign	icial (Name)		Agency	y/District Phone/24 Hour Number					
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FOR BOP USE ONLY									
Receiving Official (Name) Date / Time Releasing Official (Name) Date / Time Sign									
Print Print									
Name Search	Data: (Must Init Completed by:	ARS Co	Staff Init.		HT THUMBPRINT				
	parate Checked b	Deposi Detair Court		Amt.					

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